



U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE

REQUEST FOR CONTINUED EXAMINATION (RCE)

TRANSMITTAL FORM (37 C.F.R. § 1.114)

DOCKET NO. 2345/117	APPLICATION SERIAL NO. 09/555,662	EXAMINER Jeffrey N. Zahn	ART UNIT 2828
------------------------	--------------------------------------	-----------------------------	------------------

APPLICANT(S):
Hartmut HILLMER and Bernd KLEPSE

Address to:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
Mail Stop RCE

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

Date April 12, 2004

Signature: [Signature]
Linda M. Shudy (Reg. no. 47,084)

This is a **Request for Continued Examination** under 37 C.F.R. § 1.114 (RCE) of pending application Serial No. 09/555,662 having a filing date of August 25, 2000, entitled **METHOD AND DEVICE FOR TUNING THE WAVELENGTH OF AN OPTOELECTRONIC COMPONENT ARRANGEMENT**.

The following constitute(s) the submission **required** by 37 C.F.R. § 1.114(a) and is (are) attached:
 Information Disclosure Statement (as per 37 C.F.R. § 1.114(c)) (attached).
 X Other Submission: Amendment (attached)

1. The filing fee for this RCE and the required amendment/submission is calculated below. The fee below is calculated based on the status of the claims after the entry of the attached amendment/submission. The fee for any new additional claims is included with this RCE, the fee for previously entered additional claims having already been paid.

	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA*	RATE (\$ PER CLAIM	FEE (\$)
BASIC FEE						770.00
TOTAL CLAIMS	19	20	19	0	18.00	0.00
INDEPENDENT CLAIMS	2	3	2	0	86.00	0.00
MULTIPLE DEPENDENT CLAIM	0	0	0	0	280.00	0.00
				*Number extra must be zero or larger	TOTAL	770.00

U.S. Patent App. Ser. No. 09/555,662

2. Please charge the required RCE and Submission filing fee of \$770.00 to the deposit account number 11-0600 of **Kenyon & Kenyon**.
3. The Commissioner is hereby authorized to charge the 37 C.F.R. § 1.136(a) five-month extension fee, which is believed to be \$2010.00, to the deposit account number 11-0600 of **Kenyon & Kenyon**. The Commissioner is hereby authorized, as necessary and/or appropriate, to charge payment of the fees (including any additional and/or extension fees) required, associated with this communication or arising during the pendency of this application, and/or to credit any overpayment, to the deposit account number 11-0600 of **Kenyon & Kenyon**.
4. **Three duplicate copies** of this Transmittal Form are enclosed for the above purposes.

Respectfully submitted,

By: *Inda Sandoz*
Reg. No. 47084

Dated: April 12, 2004

By:

Richard L. Mayer

Richard L. Mayer (Reg. No. 22,490)

KENYON & KENYON
One Broadway
New York, New York 10004
(212) 425-7200 (telephone)
(212) 425-5288 (facsimile)

CUSTOMER NO. 26646